-		•						
U.S. DEPARTMENT OF HOMEL	AND SECURITY	EL EVATIO	N CERTIFICATI	=				
FEDERAL EMERGENCY MANAG National Flood Insurance Progra	SEMENT AGENC				OMB No. 1660-0008			
			he instructions on pa		Expiration Date: July 31, 2015			
id Dudder Owneds Name	FOR INSURANCE COMPANY USE							
A1. Building Owner's Name	ŧ	Policy Number:						
A2. Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Bex No. Company NAIC Number: Company NAIC Number:								
City RICHMOND HILL State GA. ZIP Code 31824								
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)								
A4. Building Use (e.g., Res A5. Latitude/Longitude: Lat A6. Attach at least 2 photog A7. Building Diagram Numi A8. For a building with a cr a) Square footage of c b) Number of permans or enclosure(s) with c) Total net area of flo d) Engineered flood of	Long. graphs of the buller per 1 A awispace or encurawispace or encurawispace or encuration awispace or encurawispace or encuration awispace or e	Horizonta Horizonta Iding if the Certificate is be lesure(s): Closure(s) 8 1 1 1 1 1 1 1 1 1	AS For a sq ft b) No sq ft c) To d) E	NAD 1983 building with an attact puare footage of attact umber of permanent thin 1.0 foot above a otal net area of flood ngineered flood open	ched garage sq ft flood openings in the attached garage djacent grade openings in A9.b sq in ings? Yes			
And the second s	SECT	10N B - FLOOD INSU	RANCE RATE MAP (FIR	M) INFORMATIO	N			
B1. NFIP Community Name		lumber 82.0	County Name BRYAN		B3. State GEORGIA			
84. Map/Panel Number 13 029 4 0 2/8 3	B5. Suffix	B6. FIRM Index Date 3-2-59	B7. FIRM Panel Effective/Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)			
B10. Indicate the source of t FIS Profile B11. Indicate elevation datu B12. Is the building located i Designation Date:	FIRM m used for BFE	☐ Community Determine in Item B9: ☐ NGVD 192 ier Resources System (CI	ed	Other/Source:	☐ Yes ∰ No			
	SECTIO	N C - BUILDING ELEV	ATION INFORMATION	SURVEY REQUIR	2FN			
C2. Elevations – Zones A1– below according to the E Benchmark Utilized: L- Indicate elevation datum	pased on: tate will be requi A30, AE, AH, A building diagram CAC used for the ele	Construction Drawing red when construction of the when construction of the with BFE), VE, V1–V30, Ve specified in item A7, In Pu	s* Building Under the building is complete. / (with BFE), AR, AR/A, AR//, Lerto Rico only, enter meters artical Datum: //TYD [9]	er Construction* AE, AR/A1—A30, AR/	Finished Construction AH, AR/AO. Complete Items C2.a-h			
	. •	3		Check	the measurement used.			
b) Top of the next higher	rfloor . ···	nt, crawispace, or enclosu		1.5	☐ feet ☐ meters ☐ feet ☐ meters			
c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab)					☐ feet ☐ meters			
	achinery or equ	pment servicing the buildi	ng 7	~ T	☐ feet ☐ meters ☐ feet ☐ meters			
f) Lowest adjacent (finis	hed) grade next	to building (LAG)	1	0.6	☐ feet ☐ meters			
g) Highest adjacent (finish)h) Lowest adjacent grad	shed) grade nex e at lowèst elevi	to building (HAG) ation of deck or stairs, incl	uding structural support/	0.8	feet meters feet meters			
Million Commission of the Comm	SECTIO	ON D - SURVEYOR. E	NGINEER, OR ARCHITE					
This postfingtion is to be a six			, orthogen	- SERRICHIK	J14			

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. Check here if comments are provided on back of form.

Check here if attachments. Were latitude and longitude in Section A provided by a

licensed land surveyor?

Certifier's Name License Number Signature

IMPORTANT: In these spaces, copy the consoponding information from Section A.	FOR INSURANCE COMPANY USE
Ruilding Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number:
RICHMOND HILL . State GA. ZIP Code 313	Company NAIC Number:
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATI	
opy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) b	
omments C Z(C)= ALVA COMBITION UNIT PLATFORM	owen's center.
THAT HAS ELOOD VENTS.	o- Overes
ignature U incert / fall of Date 10-21-	
SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZO	NE AO AND ZONE A (WITHOUT BFE)
For Zones AO and A (without BFE), complete items E1-E5, if the Certificate is intended to support a LOMA or and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, e	
1. Provide elevation information for the following and check the appropriate hoves to characteristic the	valion is above or helps the highest estimant
of Transferred Base Control of the C	
b) Too of bottom floor fincturing becoment crawlenges or and activities to	neters above or below the HAG. neters above or below the LAG.
22 For building Diagrams 6-9 with permanent nood openings provided in Section A teams 8 and/or 9 (see r	races 8-9 of Instructions) the next high
3. Attached garage (top of slab) is Theters Clabove or Chelow the House	DBIOW INE HAG.
4. Top of platform of machinery and/or equipment servicing the building is	m Dahaman Dhataa u
 Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance ordinance? Yes No Unknown. The local official must certify this information in Section G. 	a with the community to the state
SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE	
he property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (wit r Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge. roperty Owner's or Owner's Authorized Representative's Name!	hout a FEMA-issued or community-issued BFE
Topoldy Child a Children of Manual Straines Maines	
dimen	
Chy	State ZIP Code
Chy	State ZIP Code Telephone
Signature Date	
Signature Date	
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SECTION G — COMMUNITY INFORMATION (OPTIONAL placed official who is authorized by law or options of the community of the community information of the community in	Telephone Check here if attachme
SECTION G — COMMUNITY INFORMATION (OPTIONA a local official who is authorized by law or ordinance to administer the community's floodplain management ordinate Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Item The information in Section C was taken from other documentation that has been signed and sealed in item is authorized by law to certify elevation information. (Indicate the source and date of the elevation decided in the communication of the elevation of the elevation decided in the communication of the elevation of the elevation decided in the communication of the elevation decided in the elevation of the elevation decided in the elevation of the elevation decided in the el	Telephone Check here if attachme L) Telephone Check here if attachme C
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⊿uilding Photographs

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the correspondi	FOR INSURANCE COMPANY USE Policy Number:			
Building Street Address (including Apt., Unit, Suite, and/or Bldg 200 Captains Walk				
City Richmond Hill	State GA	ZIP Code 31324	Company NAIC Number:	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

PHOTOS TAKEN 10/21/13



FRONT VIEW



REAR VIEW

Building Photographs

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE Policy Number:		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. 200 Captains Walk			
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PHOTOS TAKEN 10/21/13



FRONT VIEW



REAR VIEW